

EVENT NAME **JDRF'S SPOKER RIDE**

EVENT LOCATION **CAUGHLIN CLUB**

### EVENT DATES AND TIMES

Setup Date	5/09/2015	Setup Start Time	7:00 am
Event Start Date	5/09/2015	Event End Date	5/09/2015
Daily Event Start Time	8:00 am	Daily Event End Time	12:00 p.m.
Dismantle Date	5/09/2015	Dismantle End Time	2:00p.m.

### EVENT DESCRIPTION

(To be included on the City of Reno's Website Special Events Calendar – maximum of 275 characters)

A 10,25 or 50 mile bike ride benefitting The Juvenile Diabetes Research Foundation. Prizes for the best three poker hands( cards are gathered along the route)

ON SITE CONTACT **Janet Smagala** ON SITE NUMBER **775 741-4079**

I certify that the information contained in the foregoing application is true and correct to the best of my knowledge and belief. I have read, understand and agree to abide by the rules and regulations governing the proposed Special Activity or Event under the Reno Municipal Code. I understand that this application is made subject to the rules and regulations established by the City Council and/or the City Manager or the City Manager's designee. I agree to comply with all other requirements of the City, County, State, Federal Government, and any other applicable entity which may pertain to the use of the event venue and the conduct of the event. I agree to abide by all rules, regulations and permit conditions and further certify that I, on behalf of the Host Organization, am also authorized to commit that organization, and therefore agree to be financially responsible for any cost and fees that may be incurred by or on behalf of the event to the City of Reno. Such City Services may include, but are not limited to, Police, Fire, Public Works, Parks and Recreation, Business License and/or other necessary services provided by the City of Reno.

**Indemnification of the City of Reno.** By signing this application the applicant, and any organization the applicant represents, agrees to indemnify, defend and hold harmless the City and its officers, agents and employees (collectively "Indemnitees") from and against any claim, loss, damage, injury, death and liability of every kind, nature and description (including without limitation, incidental and consequential damages, court costs, attorneys' fees and costs of investigation) that arise directly or indirectly, in whole or in part, from or relating to any conduct of the applicant or the applicant's principals, agents, employees, subcontractors, vendors or invitees pursuant to any permit issued pursuant to this application. City does not waive, and specifically reserves, all of its statutory and common law defenses, including all protections under NRS Chapter 41.

EVENT COORDINATOR'S SIGNATURE

EVENT COORDINATOR'S NAME

*Janet Smagala*  
*Janet Smagala*

### TYPE OF EVENT

See FAQ for clarification of event types

- ☐ Special Activity
- ☐ Special Event – Parks
- ☐ Special Events -- Street / Sidewalk Occupancy

### EVENT WILL INCLUDE

(check all that apply)

- ☐ Amplified Sound/Multimedia  
Attachment A Required
- ☐ Street/Sidewalk Occupancy  
Attachment B Required
- ☐ Alcohol Service  
Attachment C Required
- ☐ Vendors/Exhibitors  
Attachment D Required
- ☐ Privileged Sales  
Attachment E Required
- ☐ Event Set-Up  
Attachment F Required
- ☐ Park Usage  
Attachment G Required
- ☐ Food/Beverage Service  
Contact Washoe County  
Environmental Health Services  
(775) 328-2620

This application alone does not authorize a Special Activity or Event. Application must be reviewed by all necessary departments prior to permit issuance. Permit must be on-site during the event and must be shown, upon demand, to any member of the City of Reno Police, Fire, Public Works, Parks and Recreation, Business License Department(s) or City Manager's Office.

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Gaming Capital Group

HOST ORGANIZATION	Juvenile Diabetes Research	EVENT COORDINATOR	Janet Smagala
MAILING ADDRESS	5335 Kietzke, Suite 230	CITY/STATE/ZIP	Reno, NV 89511
DAYTIME PHONE		CELL PHONE	7757414079
WEBSITE	spokerridereno.com	EMAIL ADDRESS	jvsmagala@shcglobal.net
ONSITE CONTACT	Mary Powell	CELL PHONE	
PUBLIC CONTACT	Mary Powell	DAYTIME PHONE	775.786.1881
FEDERAL TAX ID	23-1907729	<input type="checkbox"/> HOST ORGANIZATION IS NON-PROFIT Proof of current non-profit status must be included with application.	

ANTICIPATED ATTENDANCE: DAILY \_\_\_\_\_ TOTAL 100

☐ OPEN TO THE PUBLIC      ☒ ADMISSION WILL BE CHARGED \$ Varies

↓ FOR CITY OF RENO OFFICE USE ONLY ↓				
Application Processing Fee* 0-49 Vendors	<input type="checkbox"/>	\$103.00		
Application Processing Fee* 50+ Vendors	<input type="checkbox"/>	\$258.00		DATE ENTERED
Temporary Vendor Business License	<input type="checkbox"/>	\$ 15.00 x		FAX TO
Temporary Alcohol Permit, 1 Booth/Day	<input type="checkbox"/>	\$ 55.00 x		<input type="checkbox"/> Fire
Temporary Alcohol Permit, Add'l Booth/Day	<input type="checkbox"/>	\$ 22.00 x		<input type="checkbox"/> Zoning
Fire Inspection	<input type="checkbox"/>	\$111.00		<input type="checkbox"/> Health
Additional Fire Permits	<input type="checkbox"/>	TBD	Refer to "FD" Section	<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete
City Service Fee	<input type="checkbox"/>	TBD	Actual Cost of City Services	Reason Incomplete:
Late Fee	<input type="checkbox"/>	TBD	Refer to Reno Municipal Code	
*Application fees must be paid at the time the application is submitted and are not refundable under any circumstances*				
TOTAL FEES		103		INITIALS
TOTAL PAID				